

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>AS</i>		4/11/01
FORMALITY REVIEW	<i>A.T.</i>	1071	4/25/01
RESPONSE FORMALITY REVIEW	<i>AT</i>	676	10/12/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	5/11/01
2	5/11/01
3	5/11/01
4	5/11/01
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50	5/11/01

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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14.5.  
4-25-01